



1 COPY OF PAPERS
ORIGINALLY FILED

ATTORNEY DOCKET NO: BEIERSDORF 730-WCG
6713-St-bb

COMBINATION DECLARATION & POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention recited.

METHOD OF AT LEAST PARTLY COATING BACKING MATERIALS

the specification of which was filed on July 19, 2001.

Application Serial No. 09/902,055 and

hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Ecology (united)

100.39.854.7
: Number i

Geography
(Country)

16 August 2000
(Day/Month/Yr. Filed)

yes no

— (Number)

—
(Country)

(Day/Month/Yr. Filed)

— yes .. no

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

Application Serial No. 1

(Filing Date)

(Status)
abandoned

Application Serial No. 1

(Edition Date)

(Status)

hereby declare that
aforesaid and before
willful false statement
of the United States
agent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith

Albert G. Briscoe, Reg. No. 33,141; William C. Gerstenzang, Reg. No. 27,552; Lorimer P. Brooks Reg. No. 15,155, Bruce Linda, Reg. No. 33,531, all of 220 East 42nd Street, 30th Floor, New York, New York 10017; William R. Robinson, Reg. No. 27,224 of 721 Route 202-206 Bridgewater, New Jersey 08807; Davy E. Zenerach, Reg. No. 31,267, Mark A. Montana, Reg. No. 44,948 and Robert A. Hyde, Reg. No. 46,354, of 721 Route 202-206, Bridgewater, New Jersey 08807, my attorneys with full power of substitution and revocation

SEND CORRESPONDENCE TO:
NORRIS, McLAUGHLIN & MARCUS
220 EAST 42ND STREET - 30TH FLOOR
NEW YORK, NEW YORK 10017

DIRECT TELEPHONE CALLS TO:
WILLIAM C. GERSTENZANG
(212) 808-0700

FULL NAME OF SOLE OR FIRST INVENTOR: Dr. Klaus KEITE-TH GENBLUSCHER
INVENTOR'S SIGNATURE: Klaus Keite-Genblusch **DATE:** 19.10.01
RESIDENCE: Ebel-Andresen-Str. 4, 22529 Hamburg, Germany **CITIZENSHIP:** Germany
POST OFFICE ADDRESS: Ebel-Andresen-Str. 4, 22529 Hamburg, Germany

FULL NAME OF SECOND INVENTOR: Peter JAUCHEN
INVENTOR'S SIGNATURE: Peter Jauchen **DATE:** 22.10.01
RESIDENCE: Sachsenweg 18/6, 22455 Hamburg, Germany **CITIZENSHIP:** Germany
POST OFFICE ADDRESS: Sachsenweg 18/6, 22455 Hamburg, Germany

FULL NAME OF THIRD INVENTOR: Michael SCHAECK
INVENTOR'S SIGNATURE: Michael Schaeck **DATE:** 12.11.01
RESIDENCE: Oberlander Str. 24, 81371 München, Germany **CITIZENSHIP:** Germany
POST OFFICE ADDRESS: Oberlander Str. 24, 81371 München, Germany

FULL NAME OF FOURTH INVENTOR: _____
INVENTOR'S SIGNATURE: _____ **DATE:** _____
RESIDENCE: _____ **CITIZENSHIP:** _____
POST OFFICE ADDRESS: _____

FULL NAME OF FIFTH INVENTOR: _____
INVENTOR'S SIGNATURE: _____ **DATE:** _____
RESIDENCE: _____ **CITIZENSHIP:** _____
POST OFFICE ADDRESS: _____

FULL NAME OF SIXTH INVENTOR: _____
INVENTOR'S SIGNATURE: _____ **DATE:** _____
RESIDENCE: _____ **CITIZENSHIP:** _____
POST OFFICE ADDRESS: _____